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| Fill in this information to identify your case: | | |
|---|-------------------------------|--------------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF VIRGINIA | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Ashlee | |
| | your government-issued picture identification (for | First name | First name |
| | example, your driver's | Breann | |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your | Ayala | |
| | meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7809 | |

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Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EIN | EIN |
| 5. | Where you live | 1916 Wrens Nest Rd. | If Debtor 2 lives at a different address: |
| | | Richmond, VA 23235 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Chesterfield | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Debtor 1 Ashlee Breann Ayala

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Debtor 1 Ashlee Breann Ayala Case number (if known)

| | The chapter of the | | | | | v 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy |
|----|---|------------|---------------------------|---|---|--|
| | Bankruptcy Code you are choosing to file under | _ | ,, | , go to the top of page 1 | and check the appropria | ite box. |
| | - | Chapt | | | | |
| | | ☐ Chapt | ter 11 | | | |
| | | ☐ Chapt | ter 12 | | | |
| | | ☐ Chapt | ter 13 | | | |
| | How you will pay the fee | abo ord | out how y er. If you | ou may pay. Typically, if | you are paying the fee y | ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with |
| | | | | | | ion, sign and attach the Application for Individuals to Pay |
| | | | • | ee in Installments (Officia at my fee he waived (Yo | , | on only if you are filing for Chapter 7. By law, a judge may, |
| | | but app | is not red olies to yo | quired to, waive your fee, our family size and you a | and may do so only if you e unable to pay the fee i | our income is less than 150% of the official poverty line the in installments). If you choose this option, you must fill out icial Form 103B) and file it with your petition. |
| | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes. | District | | \\/hon | Coop number |
| | | | District | | When When | Case number |
| | | | District | | When | Case number Case number |
| | | | District | | vvnen | Case number |
| | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | Do you rent your | □ No. | Go to | line 12. | | |
| ı. | | | | our landlard abtained an | eviction judgment agains | et vou? |
| ١. | residence? | Yes. | Has y | our iandiord obtained an | eviction judgment agains | st you: |
| 1. | | ■ Yes. | Has y ■ | No. Go to line 12. | eviction judgment again | ot you: |

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Debtor 1 Ashlee Breann Ayala Case number (if known)

| Par | t 3: Report About Any Bu | sinesses | You Own as a | Sole Propriet | or |
|-----|---|-------------------|---|-------------------------------------|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part | 4. | |
| | | ☐ Yes. | Name and | location of busi | iness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of bu | usiness, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, S | treet, City, State | e & ZIP Code |
| | it to this petition. | | Check the | appropriate box | x to describe your business: |
| | | | ☐ Hea | alth Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | ☐ Sin | gle Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | ☐ Sto | ckbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | ☐ Coi | mmodity Broker | r (as defined in 11 U.S.C. § 101(6)) |
| | | | ☐ Noi | ne of the above | • |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? | proceed you are o | under Subchap choosing to pro v statement, an | oter V so that it ceed under Sul | court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or behapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. |
| | For a definition of small | ■ No. | I am not fili | ng under Chap | ter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing ι Code. | under Chapter 1 | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11. |
| | | ☐ Yes. | | | 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11. |
| Par | t 4: Report if You Own or | Have Any | Hazardous P | roperty or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | |
| | of imminent and identifiable hazard to | | What is the h | azard? | |
| | public health or safety? | | | | |
| | Or do you own any property that needs immediate attention? | | If immediate a needed, why | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the | property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |

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Debtor 1 **Ashlee Breann Ayala** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known)

| 16. | What kind of debts do you have? | 16a. | Are your debts primarily coindividual primarily for a person | nsumer debts? Consumer debts are definal, family, or household purpose." | ned in 11 U.S.C. § 101(8) as "incurred by an |
|-----|--|------------------------|---|--|---|
| | | | ☐ No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | 16b. | | siness debts? Business debts are debts the through the operation of the bus | |
| | | | ☐ No. Go to line 16c. | | |
| | | | ☐ Yes. Go to line 17. | | |
| | | 16c. | State the type of debts you ow | ve that are not consumer debts or busines | ss debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7 | 7. Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | o you estimate that after any exempt prop ilable to distribute to unsecured creditors? | perty is excluded and administrative expenses? |
| | administrative expenses are paid that funds will | | ■ No | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | |
| 18. | How many Creditors do you estimate that you | 1 -49 | | □ 1,000-5,000 □ 5001-10,000 | □ 25,001-50,000 □ 50,001-100,000 |
| | owe? | ☐ 50-99 ☐ 100-1 | aa | ☐ 10,001-25,000 | ☐ More than100,000 |
| | | 200-9 | | ., | |
| 19. | How much do you | \$0 - \$ | 50,000 | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 01 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion |
| 20. | How much do you | □ \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | | | 001 - \$500,000 001 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| Par | 7: Sign Below | | | | |
| For | you | I have ex | amined this petition, and I declar | are under penalty of perjury that the inforr | mation provided is true and correct. |
| | | If I have of United St | chosen to file under Chapter 7, cates Code. I understand the re | I am aware that I may proceed, if eligible, lief available under each chapter, and I ch | under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. |
| | | | | ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b). | ot an attorney to help me fill out this |
| | | • | | napter of title 11, United States Code, spe | • |
| | | bankrupto and 3571 | cy case can result in fines up to | concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Ashlee | ee Breann Ayala Breann Ayala e of Debtor 1 | Signature of Debto | r 2 |
| | | Executed | on February 23, 2021 | Executed on | |
| | | | MM / DD / YYYY | MM | I / DD / YYYY |

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Debtor 1 Ashlee Breann Ayala

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Clinton Davis | Date | February 23, 2021 |
|--|---------------|-------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Clinton Davis | | |
| Printed name | | |
| Clinton Davis, Esq., LLC | | |
| Firm name | | |
| 3601 W. Hundred Rd, Suite 2 Chester, VA 23831 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 804-332-4041 | Email address | |
| 76653 VA | | |
| Bar number & State | | |

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| | Document Page 6 01 31 | | | |
|-------|--|-----------------------|--------------|-----------------------------|
| Fill | Il in this information to identify your case: | | | |
| Deb | ebtor 1 Ashlee Breann Ayala First Name Middle Name Last Name | | | |
| Deb | First Name Middle Name Last Name ebtor 2 | | | |
| (Spoi | pouse if, filing) First Name Middle Name Last Name | | | |
| Unit | nited States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA | | | |
| 1 | ase numberknown) | | | if this is an led filing |
| | | | | |
| | fficial Form 106Sum | | | |
| | ummary of Your Assets and Liabilities and Certain Statistical I | | - | 2/15 |
| infor | as complete and accurate as possible. If two married people are filing together, both are equormation. Fill out all of your schedules first; then complete the information on this form. If your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | u are filing amende | | |
| Part | art 1: Summarize Your Assets | | | |
| | | | Your as | sets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | | \$ | 28,268.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | | \$ | 28,268.00 |
| Part | art 2: Summarize Your Liabilities | | | |
| | | | Your lia | bilities |
| | | | Amount | you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part | 1 of Schedule D | \$ | 52,439.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | = | \$ | 35,795.00 |
| | Y | our total liabilities | \$ | 88,234.00 |
| Daw | Summarine Vann leasure and Europe | | | |
| Pan | art 3: Summarize Your Income and Expenses | | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | | \$ | 4,565.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | | \$ | 4,550.00 |
| Part | art 4: Answer These Questions for Administrative and Statistical Records | | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form | to the court with you | ır other sch | edules. |
| 7. | ■ Yes What kind of debt do you have? | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an ind household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. | | a personal, | family, or |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the court with your other schedules. | the form. Check this | box and su | bmit this form to |

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Debtor 1 Ashlee Breann Ayala

Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14. |

\$_____\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total clain | n |
|--|-------------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Desc Main Document Page 10 of 51 2/23/21 2:49PM Fill in this information to identify your case and this filing: Debtor 1 Ashlee Breann Ayala Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Volkswagen Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Atlas** ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2019 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$20,588.00 \$20,588.00 ☐ Check if this is community property (see instructions) Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

No

☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

\$20,588.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Filed 02/23/21 Case 21-30558-KRH Doc 1 Entered 02/23/21 14:53:13 Desc Main 2/23/21 2:49PM Document Page 11 of 51 Debtor 1 Ashlee Breann Ayala Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... Household goods and furnishings \$4,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 Household electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$5,000,00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Desc Main Page 12 of 51 2/23/21 2:49PM Document Debtor 1 Ashlee Breann Ayala Case number (if known) claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash - The debtor withdrew \$2800 as cash on the day she filed bankruptcy. \$1500 of that were her attorney fees for this case, leaving her \$1,300.00 \$1300 in cash. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking & Virginia Credit Union \$380.00 17.1. **savings** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ No Yes. Give specific information about them..... Name of entity: % of ownership: \$0.00 **Ash Bridal LLC** 100 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No ☐ Yes. Institution name or individual:

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Page 13 of 51 Document Debtor 1 Ashlee Breann Ayala Case number (if known) 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

 \square Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

Official Form 106A/B

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Desc Main Page 15 of 51 Document Debtor 1 Ashlee Breann Ayala Case number (if known) 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$1,000.00 for Part 5. Write that number here..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$20,588.00 57. Part 3: Total personal and household items, line 15 \$5,000.00 Part 4: Total financial assets, line 36 58. \$1,680.00 59. Part 5: Total business-related property, line 45 \$1,000.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$28,268.00 Copy personal property total \$28,268.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$28,268.00

| | | | a.g.c = c : c = | |
|---------------------|--------------------------|--------------------|-----------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Ashlee Breann A | yala | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F VIRGINIA | |
| Case number _ | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the Property | You Claim as | Exempt |
|---------|-----------------------|--------------|--------|
| | | | |

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | |
|----|---|--|--|--|--|--|--|
| | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| | ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | |

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Household goods and furnishings Va. Code Ann. § 34-26(4a) \$4,000.00 Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit Household electronics Va. Code Ann. § 34-26(4a) \$500.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Wearing apparel Va. Code Ann. § 34-26(4) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash - The debtor withdrew \$2800 as Va. Code Ann. § 34-4 \$1,300.00 \$1,300.00 cash on the day she filed bankruptcy. \$1500 of that were her attorney fees 100% of fair market value, up to for this case, leaving her \$1300 in any applicable statutory limit cash. Line from Schedule A/B: 16.1 Checking & savings: Virginia Credit Va. Code Ann. § 34-4 \$380.00 \$380.00

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 17.1

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| Debt | or 1 | Asl | hlee Breann Ayala | | | Case number (if known) | |
|------|------|---|--|--------------------------------------|---------|---|------------------------------------|
| | | ef description of the property and line on needule A/B that lists this property | | Current value of the portion you own | | | Specific laws that allow exemption |
| | | | | Copy the value from Schedule A/B | Che | | |
| | | airstyling equipment: scissors, low dryers, etc. ne from Schedule A/B: 40.1 | | \$1,000.00 | | \$1,000.00 | Va. Code Ann. § 34-26(7) |
| | | | | | | 100% of fair market value, up to any applicable statutory limit | |
| | | • | elaiming a homestead exemption adjustment on 4/01/22 and every | | | led on or after the date of adjustme | nt.) |
| | | | Did you acquire the property cove | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | | | Yes | | | | |

| Case 21-305 | 558-KRH | | Filed 02/23/2 ocument I | 21 Ente Page 18 | ered 02/23/21 1 of 51 | L4:53:13 Des | c Main 2/23/21 2:49PI |
|---|-------------------------------|------------------------------|----------------------------|--------------------|--|--|--------------------------|
| Fill in this information to i | dentify your ca | ise: | | Ü | | | |
| Debtor 1 Ashle | e Breann Aya | la | | | | | |
| First Nam | | Middle Name | е | Last Name | | | |
| Debtor 2 (Spouse if, filing) First Nam | e | Middle Name | e | Last Name | | | |
| United States Bankruptcy C | ourt for the: | EASTERN DIS | STRICT OF VIRGI | NIA | | | |
| Case number | | | | | | ☐ Check | if this is an |
| | | | | | | _ | ded filing |
| Official Form 106D | | | | | | | |
| Schedule D: Cre | editors W | /ho Have | e Claims S | Secure | d by Propert | y | 12/15 |
| Be as complete and accurate as needed, copy the Additional number (if known). | | | | | | | |
| . Do any creditors have claim | s secured by you | ır property? | | | | | |
| ☐ No. Check this box a | nd submit this f | orm to the cour | rt with your other s | chedules. Yo | ou have nothing else t | o report on this form. | |
| Yes. Fill in all of the | nformation belo | W. | | | | | |
| Part 1: List All Secured | Claims | | | | | | |
| 2. List all secured claims. If a | creditor has more | than one secure | ed claim. list the credi | tor separately | Column A | Column B | Column C |
| for each claim. If more than on much as possible, list the claim | e creditor has a pa | articular claim, lis | t the other creditors i | n Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Argent Credit Unio | on De | scribe the prope | erty that secures the | e claim: | \$52,439.00 | \$20,588.00 | \$31,851.00 |
| Creditor's Name | 20 | 19 Volkswa | gen Atlas | | | | |
| Attn: Bankruptcy Po Box 72 Chesterfield, VA 2 | app | | file, the claim is: Cr | heck all that | | | |
| Number, Street, City, State & | Zip Code | Unliquidated | | | | | |
| Who owes the debt? Check | | Disputed ture of lien. Ch | eck all that apply. | | | | |
| ■ Debtor 1 only | _ | | ou made (such as mo | ortgage or sec | cured | | |
| Debtor 2 only | | car loan) | | | | | |
| Debtor 1 and Debtor 2 only | | Statutory lien (su | uch as tax lien, mech | anic's lien) | | | |
| ☐ At least one of the debtors a | ind another $\ \square$ | Judgment lien fr | om a lawsuit | | | | |
| ☐ Check if this claim relates community debt | to a 🔲 | Other (including | a right to offset) | | | | |
| 02/ | ened 20 Last tive 01/21 | Last 4 digits | s of account numbe | er 0010 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$52,439.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$52,439.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

| | | Document | Page 19 | of 51 | 2/23/21 2:49PM |
|--|--|---|----------------------------------|--|---|
| Fill in thi | s information to identify your | case: | · · | | |
| Debtor 1 | Ashlee Breann Ay | vala | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fi | ling) First Name | Middle Name | Last Name | | |
| | 5 , | | | | |
| United St | ates Bankruptcy Court for the: | EASTERN DISTRICT OF VIR | GINIA | | |
| Case nun | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106E/F | | | | |
| | | ho Have Unsecured | Claims | | 12/15 |
| Schedule G Schedule D eft. Attach ame and d | Executory Contracts and Unexported to Creditors Who Have Claims Secthe Continuation Page to this page as enumber (if known). | ired Leases (Official Form 106G). I ured by Property. If more space is le. If you have no information to re | Do not include needed, copy t | contracts on Schedule A/B: Proper any creditors with partially secure the Part you need, fill it out, numb do not file that Part. On the top of | ed claims that are listed in er the entries in the boxes on the |
| Part 1: 1. Do an | List All of Your PRIORITY Un y creditors have priority unsecure | | | | |
| | . Go to Part 2. | u ciainis against you! | | | |
| ☐ Ye | | | | | |
| L re | S. | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do an | y creditors have nonpriority unsec | cured claims against you? | | | |
| □ No | . You have nothing to report in this p | art. Submit this form to the court with | your other sche | edules. | |
| ■ Ye | s | | | | |
| unsecu | ured claim, list the creditor separately ne creditor holds a particular claim, li | y for each claim. For each claim liste | d, identify what t | b holds each claim. If a creditor has type of claim it is. Do not list claims a three nonpriority unsecured claims f | Iready included in Part 1. If more |
| | | | | | Total claim |
| 4.1 C | be Group | Last 4 digits of acc | count number | 5417 | \$334.00 |
| A P | onpriority Creditor's Name Atn: Bankruptcy To Box 900 Vaterloo, IA 50704 | When was the deb | t incurred? | Opened 02/20 Last Activ | e |
| N | umber Street City State Zip Code //ho incurred the debt? Check one. | As of the date you | file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | other Type of NONPRIO | RITY unsecured | d claim: | |
| | Check if this claim is for a com | munity | | | |
| | ebt the claim subject to offset? | ☐ Obligations arisi report as priority cla | • . | ration agreement or divorce that you | did not |
| | No | ☐ Debts to pension | n or profit-sharin | g plans, and other similar debts | |
| |] Yes | ■ Other. Specify | Collection A | Attorney Dominion Energy | |

Docu

| icu c | | | _iiiCiCu | 02/23/21 | 17.55.15 | |
|-------|-----|------|----------|----------|----------|--|
| cume | ent | Page | 20 of 5 | 51 | | |

| Debtor | 1 Ashlee Breann Ayala | Case number (if known) | | | | | | |
|--------|---|--|--|------------|--|--|--|--|
| 4.2 | Chase Card Services | Last 4 digits of account number | 2827 | \$498.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 07/18 Last Active 01/21 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure | d aleimo | | | | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | ☐ Yes | Other Specify Credit Card | | | | | | |
| 4.3 | Discover Financial Nonpriority Creditor's Name | Last 4 digits of account number | 0639 | \$5,979.00 | | | | |
| | Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 | When was the debt incurred? | Opened 03/20 Last Active 01/21 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | | |
| | ☐ Yes | Other Specify Credit Card | | | | | | |
| 4.4 | Genesis FS Card Services | Last 4 digits of account number | 0172 | \$75.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076 | When was the debt incurred? | Opened 10/20 Last Active 2/16/21 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | | | |
| | ☐ At least one of the debtors and another | | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | □ Yes | ■ Other. Specify Credit Card | | | | | | |
| | □ 169 | Other. Specify | | | | | | |

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Case number (if known) Debtor 1 Ashlee Breann Ayala 4.5 Synchrony Bank/ Old Navy Last 4 digits of account number 6150 \$319.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/15 Last Active Po Box 965060 When was the debt incurred? 12/20 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.6 Synchrony Bank/American Eagle Last 4 digits of account number \$8,000.00 4461 Nonpriority Creditor's Name Opened 04/11 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 12/11/20 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 Virginia Credit Union Last 4 digits of account number 3744 \$11,779.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/20 Last Active Po Box 90010 When was the debt incurred? 1/25/21 Richmond, VA 23225 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes

Official Form 106 E/F

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Total Claim

| Deptor | 1 Ashlee Breann Ayala | | Case number (if known) | | | | | |
|--------------------|--|---|--|-------------------------|--|--|--|--|
| 4.8 | Virginia Credit Union | Last 4 digits of account number | 5239 | \$8,811.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 90010 | When was the debt incurred? | Opened 09/18 Last Active 1/14/21 | | | | | |
| - | Richmond, VA 23225 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharir | | | | | | |
| | Yes | Other. Specify Unsecured | | | | | | |
| Part 3: | List Others to Be Notified About a De | bt That You Already Listed | | | | | | |
| is tryir have n | is page only if you have others to be notified any to collect from you for a debt you owe to so nore than one creditor for any of the debts that for any debts in Parts 1 or 2, do not fill out or | omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add | Parts 1 or 2, then list the collection agency | here. Similarly, if you | | | | |
| Name ar | nd Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | | | | | |
| | nion Power | Line 4.1 of (Check one): | $oldsymbol{l}$ Part 1: Creditors with Priority Unsecured Clair | ms | | | | |
| | ox 26666 lond, VA 23261 | | Part 2: Creditors with Nonpriority Unsecured 0 | Claims | | | | |
| | WHU. VA 73701 | | | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
|-----|---|--|---|---|
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| 01 | On the Advance | 01 | | Total Claim |
| 61. | Student loans | 61. | \$ | 0.00 |
| 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 35,795.00 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 35,795.00 |
| | 6b. 6c. 6d. 6e. 6f. 6g. 6h. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6e. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6e. \$ 6f. Student loans 6f. \$ 6g. \$ 6g. \$ 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ 6 \$ |

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| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|--------------------|-------------|-----------------------|
| Debtor 1 | Ashlee Breann A | yala | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT C | PF VIRGINIA | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have th r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | * | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |

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| Fill in this | information to identify you | Docume | nt Page 24 o | of 51 | 2/23/21 2:49PM |
|-------------------------------|--|---|--|---|--|
| | | | | | |
| Debtor 1 | Ashlee Breann A | Ayaia Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filin | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | EASTERN DISTRICT O | F VIRGINIA | | |
| Case numb (if known) | oer | | | | ☐ Check if this is an amended filing |
| | Form 106H ule H: Your Cod | dehtors | | | 12/15 |
| people are fill it out, ar | | ually responsible for supp e boxes on the left. Attach | olying correct informat the Additional Page t | tion. If more space is neede | s possible. If two married ed, copy the Additional Page, any Additional Pages, write |
| • | ou have any codebtors? (I | , | | as a codebtor. | |
| ■ N. | | | | | |
| ■ No □ Yes | | | | | |
| | nin the last 8 years, have yo a, California, Idaho, Louisiana | | | | tes and territories include |
| | Go to line 3 Did your spouse, former spo | ouse, or legal equivalent live | with you at the time? | | |
| in line Form | 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make | sure you have listed the cr | h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill |
| - | Column 1: Your codebtor lame, Number, Street, City, State and | ZIP Code | | Column 2: The creditor Check all schedules that | r to whom you owe the debt at apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| | Number Street City | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify | vour ca | se: | | | | ı | | | | |
|--------------------|--|-------------------------------------|--|---|-------------------|----------------|---------------------|-------------------------|--------------------------|-----------------------------------|-----------------|
| | , | | nn Ayala | | | | | | | | |
| | btor 2 | | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court | t for the: | EASTERN DISTRICT | OF VIRGINIA | | | | | | | |
| (If kr | se number | | | | | | | | ed filing ent showin | ng postpetition ollowing date: | • |
| | fficial Form 106l chedule I: Your | - | | | | | Ī | /IM / DD/ \ | YYYY | | |
| sup spo atta | as complete and accurate a plying correct information use. If you are separated a ch a separate sheet to this Describe Employer | i. If you a and you s form. C | are married and not filion spouse is not filion wi | ng jointly, and your s ith you, do not includ | pouse de infor | is liv mati | ing with on abou | you, incl t your spe | ude inforr ouse. If m | mation about ore space is | your needed, |
| 1. | Fill in your employment information. | | | Debtor 1 | | | | Debtor 2 | 2 or non-fi | iling spouse | |
| | If you have more than one job, attach a separate page with information about additional | | Employment status | ■ Employed□ Not employed | | | | ☐ Empl | oyed mployed | | |
| | employers. | | Occupation | Self-employed | | | | | | | |
| | Include part-time, seasona self-employed work. | al, or | Employer's name | Ash Bridal | | | | | | | |
| | Occupation may include st or homemaker, if it applies | | Employer's address | | | | | | | | |
| | | | How long employed to | here? 2 years | | | | _ | | | |
| Pai | Give Details Abo | out Mon | thly Income | | | | | | | | |
| | mate monthly income as our unless you are separate | | te you file this form. If | you have nothing to re | port for | any | line, write | e \$0 in the | space. In | clude your no | n-filing |
| | ou or your non-filing spouse he space, attach a separate s | | | ombine the information | for all | empl | oyers for | that perso | on on the li | ines below. If | you need |
| | | | | | | | For De | btor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wage deductions). If not paid me | | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly | ly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. | . Add lin | e 2 + line 3. | | 4. | \$ | | 0.00 | \$ | N/A | |

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| Debt | or 1 | Ashlee Breann Ayala | _ | C | Case number (if ki | nowr | 1) | | | | |
|------|---------------|--|-----------|------------|---|--------------|------------|----------|---------------------|------------|-----------------|
| | | | | | For Debtor 1 | | | | Debtor 2 of | | |
| | Сор | y line 4 here | 4. | _ | \$(| 0.0 |) | \$ | ming ope | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| ٥. | | • • | 5a | | \$ (| | _ | c | | NI/A | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a 5b | | · | 0.0 0.0 | _ | \$ | | N/A N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c | | · |).00).00 | _ | Ψ | | N/A | - |
| | 5d. | Required repayments of retirement fund loans | 5d | | : |).O(| _ | \$ | | N/A | = |
| | 5e. | Insurance | 5e | | : | 0.00 | _ | \$ | | N/A | - |
| | 5f. | Domestic support obligations | 5f. | | · | 0.00 | _ | \$ | | N/A | - |
| | 5g. | Union dues | 5g |] . | | 0.00 | _ | \$ | | N/A | - |
| | 5h. | Other deductions. Specify: | 5h | 1.+ | | | 0 - | + \$ | | N/A | • |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ (| 0.0 | D | \$ | | N/A | - |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ (| 0.00 | _ D | \$ | | N/A | - |
| 8. | 8b. 8c. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent | 8a 8b | | \$4,565 \$(| 5.00 0.00 | | \$ \$ | | N/A N/A | |
| | | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c |) . | \$ (| 0.0 | O | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | ı. | | 0.00 | _ | \$ | | N/A | |
| | 8e. | Social Security | 8e | €. | \$ | 0.0 | 0 | \$ | | N/A | - |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | J. | \$ |).0().0(| 0 | \$ \$ | | N/A N/A | · |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$ | 0.00 | <u>)</u> - | + \$ | | N/A | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 4,565 | 5.00 |) | \$ | | N/A | \ |
| 10. | Calo | culate monthly income. Add line 7 + line 9. | 10. | \$ | 4,565.00 | + | \$ | | N/A = | \$ | 4,565.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | · – | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ·- | | | | ., |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | • | | | | chedule J. 11. + | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. \$ | ombin | 4,565.00 ned |
| 13. | Doy | you expect an increase or decrease within the year after you file this form | ? | | | | | | m | onthly | y income |
| | | No. | | | | | _ | | | | |
| | | Yes. Explain: | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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Clinton Davis, Esq., LLC

Attorney at Law

February 23, 2021

Accounting of Business Income

Ashlee Ayala's sole source of income is her self-employment with her business, Ash Bridal. Her work is hair styling for events. Her 2019 gross income was \$54,785; her income in recent months has dropped due to current events. We've attached the redacted first page of her 2019 tax return. Also attached are her total gross receipts for 2021 YTD, with \$5066 in gross sales in 2021.

With the YTD having weather events, it seems fair to use the \$4565 figure derived from her 2019 gross (\$54,785 divided by 12). Her 2021 income will be less, but as she qualifies with the 2019 figure we're just going with it. We remain available to provide any follow-up documentation of income, and these documents will be provided to the trustee.

/s/ Clinton Davis

I, Ashlee Ayala, swear that this accounting is correct, and that at most I make \$4565 monthly from my self-employment income. I swear this is correct under penalty of perjury.

Office Avala

3601 W. Hundred Rd, Suite 2 · Chester, Virginia 23831

Phone: (804) 332-4041 · Fax: (804) 774-7536

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| Check only one box. | U.S. Individual Incol X Single Married filing joint If you checked the MFS box, enter the nam a child but not your dependent. | Married filing sepa | arately (MFS) IOH or QW box, a | Head of I | B No. 1545-0074 household (HOH) ame if the qualify | | | ot write or staple | in this space. |
|---|--|--|-----------------------------------|---|--|------------|--------------------------------|--|--------------------------------------|
| Your first name and | | Last name | | · · · · · · · · · · · · · · · · · · · | | | Yours | rocial security nu | |
| <u>Ashlee</u> | | Ayala | | | | | 100, | ootal security no | inper |
| If joint return, spous | e's first name and middle initial | Last name | | | | | Spous | e's social securi | ty number |
| <u>4119 La</u> | iber and street). If you have a P.O box, see urelwood Road | | | | | Apt. no. | Check | lential Election C here if you, or your | spouse if filing |
| N. Ches | fice, state, and ZIP code. If you have a forei terfield VA | gn address, also complete space 23234 | s below (see inst | uctions), | | | iointly, Checki tax or r | want \$3 to go to thi ng a box below will efund. You | s fund. not change your Spouse |
| Foreign country nan | ne Foreign pro | ince/state/county | | | Foreign postal | code | | If more than fou | |
| Standard 6 | | <u> </u> | | <u></u> | | | | see instr. and 🗸 | |
| Standard S Deduction | Spouse itemizes on a separate return of | | se as a depende | nt | | | | | |
| Age/Blindness Y | ou: Were born before January 2 | C | Spouse: | [] Woo box | n before January | 0.4055 | - | | |
| Dependents (see | | (2) Social secur | · | (3) Relation | | | ls bi | | |
| (1) First name | Last name | (, | ny mamba. | (o) Itelation | onip to you | Child tax | | lifies for (see instructi | - |
| | | | | | | Citild lax | crean | Credit for othe | r dependents |
| | | | | **** | | | | | + |
| | | | | | | | | | - |
| | | | | | | | | | 1 |
| 1 | Wages, salaries, tips, etc. Attach For | m(s) W-2 | | | | | 1 | · , | |
| 2a | Tax-exempt interest 2a | | b Taxable | interest. Atta | ach Sch. B if | required | 2b | | |
| 3a | Qualified dividends 3 | 7 | Ordin y d | vs. Att. Sch. B if re | 9 | | 3b | | |
| 4a | IRA distributions | | _ b Taxable | amount) | | | 4b | | |
| Standard | Pensions and annuities 4 | | Taxa | mobal | y y | | 4d | | |
| Standard Deduction for - 5a • Single or Married 6 | Soc. sec. ben. 5a | | _ b Taxable | amount | | | 5b | | |
| Ging separately | Capital gain or (loss). Attach Schedule D | if required. If not required, che | ck here | | | , ▶ 🔲 | 6 | | |
| • Married Sing | Other income from Schedule 1, | line 9 | | | | | 7a | | 54,785 |
| widow(er), | Add lines 1, 2b, 3b, 4b, 4d, 5b, | 3, and 7a. This is your to | tal income | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,. 🕨 | 7b | | 54 , 785 |
| • Head of | Adjustments to income from Schedule 1, line 22 | | | | | | 8a | | 0 |
| \$18,350 | against mic on north life to, it | iis is your adjusted gros | is income | | | 🟲 | 8b | | 54,785 |
| If you checked 9 | Standard deduction or itemize | ed deductions (from Sci | hedule A) | 9 | | 2,200 | 1 1 | | |
| Standard 10 Deduction, | Qualified business income deduction. At | ach Form 8995 or Form 8995- | ١ | | | 8,517 | | | |
| | | | | | | | المما | _ | 10 717 |
| see instructions. 11a | Add lines 9 and 10 Taxable Income, Subtract line 11a from | | | • | | | 11a | | 20,717 34,068 |

Ashlee Ayala

Re: Square Sales Report: Dec 01, 2020 - Feb 23, 2021

Feb 23, 2021 at 12:27:17 PM tamnkyle@comcast.net

On Tue, Feb 23, 2021 at 12:25 PM Square Reports

<noreply@messaging.squareup.com> wrote:



Sales Report

Reported on Feb 23, 2021 12:25 PM EST

Dec 01, 2020 12:00 AM - Feb 23, 2021 12:25 PM

All Employees

All Devices

| SALES | |
|-------------------|------------|
| Gross Sales | \$5,066.82 |
| Returns | \$0.00 |
| Discounts & Comps | \$0.00 |
| Net Sales | \$5,066.82 |
| Tax | \$114.00 |
| Tips | \$923.16 |
| Gift Card Sales | \$0.00 |
| Refunds by Amount | \$0.00 |
| Total | \$6,103.98 |
| PAYMENTS | |
| Total Collected | \$5,973.98 |

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| F | | (| | | | l | | |
|-------|-----------------------------|-------------------------------------|---------------|--|--|------------------------------|---------------------------------------|--|
| Fill | in this informat | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | Ashlee Breau | nn Ayala | l | | Check | c if this is: | |
| Dob | tor 2 | | | | | _ | An amended filing | ving postpotition shorter |
| | ouse, if filing) | | | | | | | ving postpetition chapter the following date: |
| | 10: 1 | | FACTI | DN DICTRICT OF VIDO | SINIIA | _ | MM / DD / YYYY | |
| Unit | ed States Bankr | uptcy Court for the: | EASTE | ERN DISTRICT OF VIRG | SINIA | ľ | WIM / DD / YYYY | |
| 1 | e number | | | | | | | |
| (IT K | nown) | | | | | | | |
| _ | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your I | Exper | nses | | | | 12/15 |
| info | ormation. If m | | eded, atta | If two married people ach another sheet to the on. | | | | |
| Par | t 1: Descr | ibe Your House | hold | | | | | |
| 1. | Is this a join | it case? | | | | | | |
| | No. Go to | | | | | | | |
| | ☐ Yes. Doe | s Debtor 2 live i | n a sepa | rate household? | | | | |
| | □ No | - | st file Offic | ial Form 106J-2, <i>Expens</i> | ses for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | □No | , | · | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Son | | 8 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | □Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | | enses include | | No | | | | |
| | | f people other ti d your depende | | l Yes | | | | |
| Par | t 2: Eatim | ate Your Ongoi | na Manth | ly Evnonces | | | | |
| Est | imate your ex | penses as of yo | our bankr | uptcy filing date unles | s you are using this fo applemental <i>Schedule</i> | orm as a sup J, check the | pplement in a Cha box at the top o | pter 13 case to report f the form and fill in the |
| Inc | lude expense | s paid for with r | non-cash | government assistanc | e if you know | | | |
| | | | d have in | cluded it on Schedule | I: Your Income | | Your expe | ansas |
| (On | ficial Form 10 | oi.) | | | | | Tour exp | |
| 4. | | r home owners | | nses for your residence or lot. | e. Include first mortgage | 4. \$ | | 1,500.00 |
| | If not includ | ed in line 4: | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. \$ | | 0.00 |
| | • | rty, homeowner's | - | | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 50.00 |
| 5 | | owner's associat | | dominium dues our residence, such as | home equity loans | 4d. \$ 5. \$ | | 0.00 |

| Deb | otor 1 | Ashlee Breann Ayala | Case num | nber (if known) | |
|-----|----------------|---|---------------------|-----------------|-----------------------------|
| 6. | Utiliti | ies: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | \$ | 300.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 100.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 400.00 |
| | 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| 7. | | and housekeeping supplies | 7. | \$ | 800.00 |
| 8. | Child | Icare and children's education costs | 8. | | 50.00 |
| 9. | Cloth | ning, laundry, and dry cleaning | 9. | \$ | 100.00 |
| | | onal care products and services | 10. | · - | 100.00 |
| | | cal and dental expenses | 11. | \$ | 50.00 |
| 12. | | sportation. Include gas, maintenance, bus or train fare. ot include car payments. | 12. | \$ | 200.00 |
| 13. | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 100.00 |
| 14. | | itable contributions and religious donations | 14. | | 0.00 |
| | Insur | <u> </u> | | · | 0.00 |
| | Do no | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insurance | 15a. | | 0.00 |
| | 15b. | Health insurance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle insurance | 15c. | \$ | 100.00 |
| | | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxe: Speci | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | ¢ | 0.00 |
| 17 | | Ilment or lease payments: | | Ψ | 0.00 |
| 17. | | Car payments for Vehicle 1 | 17a. | \$ | 700.00 |
| | | Car payments for Vehicle 2 | 17b. | · <u> </u> | 0.00 |
| | | Other Specify | 17c. | \$ | 0.00 |
| | | Other. Specify: | 17d. | · | 0.00 |
| 18. | | payments of alimony, maintenance, and support that you did not report as | | | |
| | | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | 0.00 |
| 19. | | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Speci | | 19. | | |
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on Sche Mortgages on other property | edule I: Yo 20a. | | 0.00 |
| | | Real estate taxes | 20a. 20b. | · | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20b. 20c. | · | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · - | 0.00 |
| | | Homeowner's association or condominium dues | 20a. 20e. | · <u> </u> | 0.00 |
| 21. | | r: Specify: | | +\$ | 0.00 |
| | | · | | | 0.00 |
| 22. | | ulate your monthly expenses | | | |
| | | Add lines 4 through 21. | | \$ | 4,550.00 |
| | 22b. (| Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. / | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,550.00 |
| 23. | Calcu | ulate your monthly net income. | | | J |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,565.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,550.00 |
| | | | | | |
| | 23c. | Subtract your monthly expenses from your monthly income. | 00- | œ. | 15.00 |
| | | The result is your monthly net income. | 23c. | \$ | 13.00 |
| 24. | For ex | ou expect an increase or decrease in your expenses within the year after yo cample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage? | | | se or decrease because of a |
| | | Fundain hans | | | |

| | , , , | | |
|--------|---------------|--|--|
| ■ No. | | | |
| □ Yes. | Explain here: | | |

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| FIII IN this infor | mation to identify your | case: | | | |
|--|--|--------------------------|------------------------------|--|--|
| Debtor 1 | Ashlee Breann A | vala | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | OF VIRGINIA | _ | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| f two married p | tion About a | | Debtor's Scl | ect information. | 12/15 |
| ears, or both. 1 | Î8 U.S.C. §§ 152, 1341, 1 | | | | on, or imprisonment for up to 20 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | l519, and 3571. | kruptcy case can result in | fines up to \$250,00 | |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | l519, and 3571. | | fines up to \$250,00 | |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | l519, and 3571. | kruptcy case can result in | fines up to \$250,00 | |
| Sig Did you pa | 8 U.S.C. §§ 152, 1341, 1 | l519, and 3571. | kruptcy case can result in | nkruptcy forms? Attach Ban | |
| Did you pa | n Below ay or agree to pay some Name of person | eone who is NOT an attor | kruptcy case can result in | ankruptcy forms? Attach Ban Declaration | oo, or imprisonment for up to 20 notice, and Signature (Official Form 119) |
| Did you pa No Yes. Under penathat they ar | Is U.S.C. §§ 152, 1341, 1 In Below Any or agree to pay some Name of person Alty of perjury, I declare the true and correct. | eone who is NOT an attor | rney to help you fill out ba | ankruptcy forms? Attach Ban Declaration | oo, or imprisonment for up to 20 notice, and Signature (Official Form 119) |
| Did you pa No Yes. Under penathat they ar X /s/ Ash | Is U.S.C. §§ 152, 1341, 1 In Below By or agree to pay some Name of person Builty of perjury, I declare | eone who is NOT an attor | kruptcy case can result in | Attach Ban Declaration | oo, or imprisonment for up to 20 notice, and Signature (Official Form 119) |

| Fill | in this infor | mation to identify you | r case: | | | |
|--------------------|---------------------------|---|--|---|---|---|
| Deb | otor 1 | Ashlee Breann A | <u>, </u> | | | |
| Dok | otor 2 | First Name | Middle Name | Last Name | | |
| | otor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | ankruptcy Court for the: | EASTERN DISTRICT OF | VIRGINIA | | |
| | se number _ | | | | _ | Check if this is an amended filing |
| Sta | atement | and accurate as possi | | re filing together, both are | cankruptcy equally responsible for sup | |
| num | ber (if know | n). Answer every que | stion. | | , aaa pagee,e ,e | |
| Par | t 1: Give I | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is you | ır current marital statı | ıs? | | | |
| | ☐ Married | i | | | | |
| | ■ Not ma | rried | | | | |
| 2. | During the | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | ■ No □ Yes. Li: | st all of the places you I | ived in the last 3 years. Do no | ot include where you live now | <i>I</i> . | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | Idress: | Dates Debtor 2 lived there |
| 3. state | | | | | ity property state or territor ico, Texas, Washington and V | |
| | ■ No □ Yes. M | ake sure you fill out <i>Scl</i> | hedule H: Your Codebtors (Of | ficial Form 106H). | | |
| D | | • | ` | , | | |
| Par | t 2 Expla | in the Sources of You | r income | | | |
| 4. | Fill in the tot | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | Yes. Fi | ll in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until ed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$5,066.00 | ☐ Wages, commissions, bonuses, tips | |

☐ Operating a business

☐ Operating a business

| De | ebtor 1 | As | hlee Br | eann Ayala | Documen | • | e number (if known) | |
|---|-------------------|-------------------------------------|--------------------------|--|---|--|--|---|
| | | | | | Debtor 1 | | Debtor 2 | |
| | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2020) | | ■ Wages, commissions, bonuses, tips | \$50,000.00 | ☐ Wages, commissions, bonuses, tips | | | | |
| | | | | | ☐ Operating a business | | ☐ Operating a business | |
| Fo (Ja | r the c anuary | alend 1 to | dar year Decemb | before that: er 31, 2019) | ■ Wages, commissions, bonuses, tips | \$54,785.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | | ☐ Operating a business | | ☐ Operating a business | |
| | List e | each s | • | d the gross inc | se and you have income that gome from each source separa | . | • | |
| | | | | | Debtor 1 | | Debtor 2 | |
| | | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| Pa | rt 3: | List | Certain | Payments You | ı Made Before You Filed for | Bankruptcy | | |
| 6. | _ | either No. | Neither individua | Debtor 1 nor la al primarily for a he 90 days before Go to line a List below | a personal, family, or househo ore you filed for bankruptcy, di 7. each creditor to whom you pai | umer debts. Consumer debta Ild purpose." id you pay any creditor a tota id a total of \$6,825* or more i | n one or more payments and tl | ne total amount you |
| | | | * Subje | not include | payments to an attorney for t | his bankruptcy case. | ations, such as child support a or after the date of adjustment | |
| | | Yes. | | | or both have primarily consu ore you filed for bankruptcy, di | | I of \$600 or more? | |
| | | | ■ No. | | 7. | | | |
| | | | □ Yes | include pa | | | d the total amount you paid that port and alimony. Also, do not i | |

Dates of payment

Amount you still owe

Total amount

paid

Creditor's Name and Address

Was this payment for ...

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Page 35 of 51 Document Debtor 1 Ashlee Breann Ayala Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Amount you **Insider's Name and Address** Dates of payment Total amount Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? 9 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift and

Address:

Official Form 107

Value

Case 21-30558-KRH Doc 1 Filed 02/23/21 Entered 02/23/21 14:53:13 Page 36 of 51 2/23/21 2:49PM Document Debtor 1 Ashlee Breann Ayala Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Clinton Davis, Esq., LLC **Attorney Fees** 2/23/21 \$1,500.00 3601 W. Hundred Rd, Suite 2 Chester, VA 23831 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was property transferred payments received or debts Address made paid in exchange Person's relationship to you

Debtor 1 Ashlee Breann Ayala

Case number (if known)

| 19. | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-proteins) | | y property to a s | self-settle | d trust or similar device o | of which you are a | | | | |
|-----|--|--|---|-------------|--|---|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | Description and v | Description and value of the property transferred | | | Date Transfer was made | | | | |
| | | | | | | made | | | | |
| Par | t 8: List of Certain Financial Accounts, Insti | ruments, Safe Deposit | Boxes, and Sto | rage Unit | S | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? | - | | | | | | | | |
| | Include checking, savings, money market, or houses, pension funds, cooperatives, associated No | | | | t; shares in banks, credit | unions, brokerage | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | | Last 4 digits of account number | Type of accourant instrument | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | tails. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | | the contents | Do you still have it? | | | | |
| 22 | Have you stared property in a stare as well as | , | hama within 4 v | voor bofor | e vev filed for benkrumte | ug. | | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | Describe | the contents | Do you still have it? | | | | |
| Par | t 9: Identify Property You Hold or Control fo | or Someone Else | | | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | | the property | Value | | | | |
| Par | t 10: Give Details About Environmental Infor | mation | | | | | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | | | | | |
| | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s | air, land, soil, surface | water, ground | | | | | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

Debtor 1 Ashlee Breann Ayala

Case number (if known)

| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | | | | |
|--|--|---|--|-----------------|--|--|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | | |
| 25. | Have you notified any governmental unit of | any release of hazardous material? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | | |
| 26. | Have you been a party in any judicial or adm ■ No | ninistrative proceeding under any enviro | onmental law? Include settlements | and orders. | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Case Title Case Number | | | | | | | | | |
| Par | 11: Give Details About Your Business or 0 | Connections to Any Business | | | | | | | | |
| 27 | Within 4 years before you filed for hankrunt | ry did you own a husiness or have any | of the following connections to any | v husiness? | | | | | | |
| | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | | |
| | _ | | | | | | | | | |
| | ■ A member of a limited liability company (LLC) or limited liability partnership (LLP)□ A partner in a partnership | | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | | |
| | □ No. None of the above applies. Go to Part 12. | | | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | | |
| | Business Name | Describe the nature of the business | Employer Identification numbe | | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Security Dates business existed | number or ITIN. | | | | | | |
| | Ash Bridal 4119 Laurelwood Rd Richmond, VA 23234 | The debtor is the 100% owner of this buisness. She's a hair stylist, and the business is to perform event hairstyling (like weddings). She is the only employee, and she runs all of her hair styling income through this business. The business owns no real estate, it owns no property. She rents a booth to perform her work. Her work is individual customers, she has no contracts. | From-To 2019 to present | | | | | | | |

2/23/21 2:49PM

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■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform | ation to identify | | | |
|---------------------------------------|--|----------------------|--|---|
| | ation to identify your o | | | |
| Debtor 1 | Ashlee Breann Ay First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States Ban | kruptcy Court for the: | EASTERN DISTRI | CT OF VIRGINIA | |
| Case number | | | | ☐ Check if this is an |
| (ii iaiowii) | | | | amended filing |
| | | | • | |
| Official For | m 108 | | | |
| | | n for Indiv | iduals Filing Under Chapte | er 7 |
| Otatemen | t or interition | ii ioi iiiaiv | iduais i iiiig Onder Onapa | 12/15 |
| If you are an indiv | ridual filing under chap | ter 7, you must fill | out this form if: | |
| _ | claims secured by you | , | | |
| You must file this | er is earlier, unless the | thin 30 days after y | ot expired. You file your bankruptcy petition or by the date set it it is to be a copies to the for cause. You must also send copies to the | |
| | ople are filing together I date the form. | in a joint case, bot | h are equally responsible for supplying correct in | nformation. Both debtors must |
| | nd accurate as possibl ur name and case num | | needed, attach a separate sheet to this form. On | the top of any additional pages, |
| Part 1: List You | ur Creditors Who Have | Secured Claims | | |
| For any creditor information below | - | rt 1 of Schedule D: | Creditors Who Have Claims Secured by Property | y (Official Form 106D), fill in the |
| | ditor and the property th | at is collateral | What do you intend to do with the property that secures a debt? | t Did you claim the property as exempt on Schedule C? |
| | | | secures a dept: | as exempt on schedule o: |
| Craditaria A. | mant Cradit Union | | | п., |
| Creditor's Ar name: | gent Credit Union | | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | 2040 Vallennamen A |) 41 o o | Retain the property and enter into a | ■ Yes |
| Description of property | 2019 Volkswagen A | Atias | Reaffirmation Agreement. | |
| securing debt: | | | Retain the property and [explain]: The debtor is seeking a reaff that reduce the principal to the value if possib. | s |
| Part 2: List You | ur Unexpired Personal | Property I eases | | |
| For any unexpired in the information | d personal property lea below. Do not list real | se that you listed i | n Schedule G: Executory Contracts and Unexpire expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(| ne lease period has not yet ended. |
| Describe your un | nexpired personal prop | erty leases | | Will the lease be assumed? |
| | p ou peroonal prop | | | _ |
| Lessor's name: Description of leas | sed | | | □ No |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | □ Na |
| Description of leas | sed | | | □ No |
| Property: | | | | ☐ Yes |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Ashlee Breann Ayala | Case number (if known) |
|--|---|
| | |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my inte property that is subject to an unexpired lease. | ention about any property of my estate that secures a debt and any personal |
| X /s/ Ashlee Breann Ayala | _ X |
| Ashlee Breann Ayala Signature of Debtor 1 | Signature of Debtor 2 |
| Date February 23, 2021 | Date |

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United States Bankruptcy Court Eastern District of Virginia

| In re | Ashlee Breann Ayala | | Case No. | |
|-------|---------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | |

| | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR |
|----|--|
| | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and tha compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |
| | For legal services, I have agreed to accept \$ 1,500.00 |
| | Prior to the filing of this statement I have received \$ 1,500.00 |
| | Balance Due |
| 2. | The source of the compensation paid to me was: |
| | ■ Debtor □ Other (specify) |
| 3. | The source of compensation to be paid to me is: |
| | \blacksquare Debtor \square Other (specify) |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. |
| 6. | By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. |

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CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

| February 23, 2021 | /s/ Clinton Davis | |
|-------------------|-----------------------------|--|
| Date | Clinton Davis | |
| | Signature of Attorney | |
| | Clinton Davis, Esq., LLC | |
| | Name of Law Firm | |
| | 3601 W. Hundred Rd, Suite 2 | |
| | Chester, VA 23831 | |
| | 804-332-4041 | |

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,296 (For all Cases Filed on or after 01/01/2019)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

| PROOF (| OF SERVICE |
|---------|--|
| | oing Notice was served upon the debtor(s), the standing Chapter 13 trustee, e Clerk's CM/ECF Policy 9, either electronically or in paper form (first class |
| Date | Signature of Attorney |

| Fill in this inform | Fill in this information to identify your case: | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| Debtor 1 | Ashlee Breann Ayala | | | | | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | | | | |
| United States Bankruptcy Court for the: Eastern District of Virginia | | | | | | | | | |
| Case number (if known) | | | | | | | | | |

| Check one box only as directed in this form and in Form 122A-1Supp: |
|---|
| ■ 1. There is no presumption of abuse |
| 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i> <i>Calculation</i> (Official Form 122A-2). |
| ☐ 3. The Means Test does not apply now because of |

Column B

Debtor 2 or non-filing spouse

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Debtor 1

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| 2. | payroll deductions). | , and c | ommissio | ons (before all | \$ 4,565.00 | \$ |
|----|---|----------------------------|-------------------------|-----------------------------|----------------|--------|
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | e paym | ents from | a spouse if | \$ 0.00 | \$ |
| 4. | All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3. | t. Inclu ld, you | de regula: r depende | contributions nts, parents, | \$ 0.00 | \$ |
| 5. | Net income from operating a business, profession, | , or far | m | | | |
| | | | Deb | otor 1 | | |
| | Gross receipts (before all deductions) | \$ | 0.00 | | | |
| | Ordinary and necessary operating expenses | -\$ | 0.00 | | | |
| | Net monthly income from a business, profession, or fa | rm \$ | 0.00 | Copy here -> | \$ 0.00 | \$ |
| 6. | Net income from rental and other real property | | | | | |
| | | | Deb | otor 1 | | |
| | Gross receipts (before all deductions) | \$ | 0.00 | | | |
| | Ordinary and necessary operating expenses | - \$ | 0.00 | | | |
| | Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | \$ 0.00 | \$ |
| 7. | Interest, dividends, and royalties | - | | | \$ 0.00 | \$ |
| | | | | | | |

Official Form 122A-1

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| | Case 21-30558-KRH | DOC T | Filea 02/23 | /21 | Entered 02/23/21 14:5 | 03.L3 | Desc Main |
|----------|---------------------|-------|-------------|-----|------------------------|-------|--------------|
| | | | Document | Pa | ge 45 of 51 | | 2/23/21 2:49 |
| Debtor 1 | Ashlee Breann Ayala | | | | Case number (if known) | | |

| | | | | | Colum | | | | umn B | | |
|--|---|---|--|--|----------|----------|---------|------------|-----------|-----------|-----------|
| | | | | | Debio | '' ' | | | | spouse | |
| 8. Unemplo | ym | ent compensation | | | \$ | | 0.00 | \$ | | | |
| | l Se | the amount if you contend that the amo ecurity Act. Instead, list it here: | | nefit under | | | | | | | |
| For you | u | pouse | \$ | 0.00 | | | | | | | |
| For you | | ' | ·····' <u> </u> | | | | | | | | |
| Pension benefit un not includ United Stadisability, pay paid udoes not do | or raderates or of understanding the second | retirement income. Do not include any rethe Social Security Act. Also, except a any compensation, pension, pay, annuity as Government in connection with a disadeath of a member of the uniformed seler chapter 61 of title 10, then include the the amount of retired pay to which er any provision of title 10 other than ch | r amount received that was stated in the next ser y, or allowance paid by ability, combat-related in rvices. If you received a nat pay only to the exter you would otherwise be | ntence, do the njury or any retired nt that it | \$ | | 0.00 | \$ | | | |
| Do not inc under the under the coronaviri crime, a c compensa Governme death of a | clude Fe Na rus o crim atio ent a me | n all other sources not listed above. de any benefits received under the Sociaderal law relating to the national emergational Emergencies Act (50 U.S.C. 160 disease 2019 (COVID-19); payments represented a gainst humanity, or international or on pension, pay, annuity, or allowance in connection with a disability, combatember of the uniformed services. If necessity and put the total below | al Security Act; paymer lency declared by the P left seq.) with respect to eceived as a victim of a domestic terrorism; or paid by the United State related injury or disabili | nts made resident to the war es ity, or | | | | | | | |
| · | | · | | | \$ | | 0.00 | \$ | | | |
| | | | | | \$ | | 0.00 | \$ | | | |
| ٦ | Tota | al amounts from separate pages, if any. | | + | \$ | | 0.00 | \$ | | | |
| | | our total current monthly income. Add the total for Column A to the | | \$ | 4,565.0 | 00 | + _ | | | = \$ | 4,565.00 |
| 12. Calculate | e yo | mine Whether the Means Test Applie | ear. Follow these steps | | | | : 44 | . | | incom | |
| 12a. Copy your total current monthly income from line 11Copy line 11 here=> \$4,565.00 | | | | | | | | | | | |
| Multi | iply | by 12 (the number of months in a year |) | | | | | | | X | |
| 12b. The | res | tult is your annual income for this part o | f the form | | | | | | 12b |). \$ | 54,780.00 |
| 13. Calculate | e th | e median family income that applies | to you. Follow these s | teps: | | | | | | | |
| Fill in the | sta | te in which you live. | VA | | | | | | | | |
| Fill in the | nur | mber of people in your household. | 2 | | | | | | | | |
| To find a | list | dian family income for your state and s of applicable median income amounts, This list may also be available at the b | go online using the link | | in the s | eparate | instru | ctions | 13. | \$ | 81,900.00 |
| 14. How do t | the | lines compare? | | | | | | | | | |
| 14a. | | Line 12b is less than or equal to line 13 Go to Part 3. Do NOT fill out or file Office | | check box | 1, Thei | re is no | presur | nption | of abus | se. | |
| 14b. 🗆 |] | Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A–2. | | (2, The pr | esumpti | on of a | buse is | detern | nined b | y Form 1 | 22A-2. |
| art 3: Sig | gn l | Below | | | | | | | | | |
| By s | igni | ing here, I declare under penalty of perj | jury that the information | on this sta | atement | and in | any att | tachme | ents is t | rue and c | orrect. |
| | | shlee Breann Ayala | | | | | | | | | |
| Α | shl | lee Breann Ayala | | | | | | | | | |

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| | | 9 | | |
|----------|--|----|------------------------|------|
| Debtor 1 | Ashlee Breann Ayala | - | Case number (if known) | |
| | Signature of Debtor 1 | | | |
| Da | February 23, 2021 MM / DD / YYYY | | | |
| | If you checked line 14a, do NOT fill out or file Form 122A-2. | | | |
| | If you checked line 14b, fill out Form 122A-2 and file it with this form | n. | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|---------------|--------------------|--|
| \$245 | filing fee | |
| \$78 | administrative fee | |
| <u>+</u> \$15 | trustee surcharge | |
| \$338 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Argent Credit Union Attn: Bankruptcy Po Box 72 Chesterfield, VA 23832

Cbe Group Attn: Bankruptcy Po Box 900 Waterloo, IA 50704

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Dominion Power PO Box 26666 Richmond, VA 23261

Genesis FS Card Services Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Synchrony Bank/ Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/American Eagle Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Virginia Credit Union Attn: Bankruptcy Po Box 90010 Richmond, VA 23225